

Vermont State Hospital Policy & Procedure	Page 1 of 5	New <input type="checkbox"/> Updated <input type="checkbox"/> Revision <input checked="" type="checkbox"/> Replaces: Same Date: 5/10/04	Effective date: 9/21/05
Title: Visitors Policy			
Advanced by: VSH Policy Committee			Date: 9/9/05
Approved by: VSH Governing Body			Date: 9/21/05

Policy Statement:

It is the policy of VSH to encourage patient visits where clinically appropriate. VSH recognizes that significant therapeutic benefit may be derived from supporting the patient's existing relationships with family and friends. VSH shall seek to realize this benefit in a manner consistent with maintaining safety and patient privacy.

Procedures:

This policy groups visitors to the Vermont State Hospital into three distinct categories: (1) visitors who are patient representatives, family members, or others who have come to VSH to see a specific patient with whom they have a pre-existing relationship ("Patient Visitors"); (2) visitors to the Vermont State Hospital who have not come to meet with a specific, identified patient or who do not have a pre-existing relationship with a patient ("Hospital Visitors"); and (3) representatives of Vermont Protection and Advocacy, Inc. The different check-in and check-out procedures for these three categories of visitors are described below.

I. Visiting Hours

Visiting hours on all units are daily from 1PM - 4PM and 6PM - 8PM. On Saturday, Sunday, and Holidays additional hours of 10AM - 11AM are also available for visitors. Exceptions to the visiting hours may be made by the charge nurse of each unit.

II. Notice to Visitors

VSH shall ensure that all visitors receive the following notice:

TO ALL VSH VISITORS:

Information concerning patients receiving treatment at Vermont State Hospital is extremely sensitive. Therefore, we request that you respect the privacy of the patients at the hospital and any information you may receive during your visit.

III. Patient Visitors -- Check-In and Check-Out

- A.** Family members and significant others who have a pre-existing and ongoing relationship with an individual patient, and patient representatives ("Patient Visitors"), may check in directly at the entrance area of the patient unit after entering VSH. The term "patient representative" includes guardians, advance directive agents, and patient attorneys. Patient Visitors must provide VSH check-in staff with their name, state whom they have come to visit, and inform check-in staff of the purpose of

their visit. Check-in staff will record this information along with the date and time of the visit in the Visitor Log. To ensure patient privacy, visitors shall not be permitted to fill out the Visitor Log. Entries in the Visitor Log shall be stored in a secure location for the duration of the patient's admission to VSH, after which they shall be destroyed.

- B.** All visitors will be asked to identify any potentially contraband materials that may be on their persons or contained in items which they have brought for patients. The charge nurse or nurse supervisor must approve any items which visitors propose to give to a patient. Visitors to B1 and B2 will be asked to leave purses, bags, keys, jewelry, and metal objects in the screening area. VSH reserves the right to prohibit visitors from bringing any item into the unit that, in the discretion of check-in staff, poses a potential threat to the safety and security of patients (please refer to the VSH Restricted Items and Search Policy for a non-exhaustive list of restricted items). On B1, visitors will be scanned by a metal detector prior to entering the unit.
- C.** Check-in staff may verify that visitors' pockets are empty and inspect visitors' bags so as to confirm the absence of contraband or items that may be harmful to patients, other visitors, or staff.
- D.** Patients are free to receive visits from anyone unless the attending physician or a member of the patient's treatment team has documented in the medical record that a visit from a particular individual or visits in general present a likelihood of harm to the patient or others. The VSH Imposition of Restrictions Policy provides further potential limitations on patient visitation. Patients also have the right to refuse visitors.
- E.** Individuals who appear to be under influence of alcohol or other substances, or who are using loud, abusive, or vulgar language may be denied permission to enter the unit. Individuals who engage in inappropriate behavior or who use loud, abusive, or vulgar language during a patient visit may be asked to leave at any time. Where an individual has been denied permission to enter the unit or where a visit has been terminated based on that individual's conduct, check-in staff shall notify the charge nurse or nurse supervisor and note the reason the individual was turned away or asked to leave in the Visitor Log.
- F.** Visits will be conducted in designated areas. Generally, interview rooms or the general dining area are available for patient visits.
- G.** If a visitor is under the age of 18, the visitor must be accompanied and supervised at all times by an adult visitor. Children under 18 must obtain the permission of a parent or guardian before they will be allowed to visit. VSH staff will not be responsible for supervising visiting children.
- H.** No more than four visitors per patient at the same time are allowed. Exceptions to the visitor number may be made by the charge nurse of each unit.

- I. On every visit, Patient Visitors will be required to present a valid, signed photo I.D. card or two other reliable forms of identification before they will be granted access to the unit.
- J. Visitors to patients with off-unit privileges must notify unit check-in staff when they leave the unit. Visitors to patients who are confined to the unit must notify check-in staff of the end of their visit prior to leaving. Unit staff will record the visitors' time of departure in the Visitor Log.

IV. Hospital Visitors -- Check-In and Check-Out

- A. Visitors who are not visiting an identified patient ("Hospital Visitors") must check in at the Admissions Office. This group includes but is not limited to public officials, law enforcement officers, healthcare overseers, organizational consultants, forensic consultants, recovery educators, volunteers, business associates, and advocacy organization representatives other than Vermont Protection and Advocacy (see section V, below). Media visits are governed by the VSH Media Policy.

Hospital Visitors must identify themselves and inform check-in staff of the purpose of their visit. Check-in staff shall record this information along with the date and time of the visit in the Visitor Log. All Hospital Visitors must provide a valid, signed photo I.D. card or two other reliable forms of identification before they will be permitted to enter the unit. If an individual is denied entry, check-in staff shall notify the nurse supervisor and note the reason the individual was denied entry in the Visitor Log.

- B. The Admissions Office shall issue every Hospital Visitor a visitor's pass which the visitor shall display on his or her person while in VSH.
- C. Prior to leaving VSH, Hospital Visitors must check out at the Admissions Office and return their visitor's pass. Admissions staff will record the visitors' time of departure in the Visitor Log.

IV. Vermont Protection and Advocacy (VT P&A)

Representatives of Vermont Protection and Advocacy shall have access to patients in accordance with 42 CFR Part 51. VT P&A is funded to provide legal representation and advocacy for persons with significant mental illness or emotional impairment as determined by a mental health professional.

- A. FACILITIES- The law states that a P&A system shall have reasonable unaccompanied access to public and private facilities providing care and treatment for individuals with mental illness. The P&A staff should be able to access all areas of the hospital, which are used by patients or are accessible to patients. When in a hospital P&A staff may inspect, view, and photograph those areas used or accessible to patients, and monitor hospital compliance with respect to the rights and safety of

patients. The P&A staff are required to conduct their activities to minimize interference with hospital programs and to respect patient's privacy interests. The P&A staff may have access to a hospital on request when: an incident is reported or a complaint is made to the P&A; the P&A determines there is probable cause to believe an incident has or may occur; or the P&A determines there is or may be imminent danger or serious abuse or neglect of an individual. If access is denied or delayed the P&A must be provided with a written statement of the reason.

- B. PATIENTS AND FACILITY STAFF** – The P&A is allowed reasonable unaccompanied access to patients during times that will include, at a minimum, normal working hours and visiting hours. Unaccompanied access to patients includes the ability to regularly meet and communicate privately with patients via telephone, mail, or in person. This access includes minors and patients with guardians. However, a P&A may not take formal action on behalf of a minor unless a parent or guardian has given consent. Consent from a parent or guardian is not necessary if the P&A determines that there is, or may be, imminent danger of serious abuse or neglect. This right of access includes access to patients at all times necessary when conducting an investigation into abuse or neglect as well as an opportunity to interview hospital staff.

Guidance:

VSH may deny access for unscheduled visits that occur outside of regular visiting hours or that take patients away from scheduled program time. VSH shall offer reasonable alternative times to such visitors.

VSH may deny access to a patient's medical record if the chart is in use at the time. VSH shall offer individuals entitled to view the patient's medical records with reasonable alternative times when the patient's medical records may be reviewed.